| I<br>N   | Agenc   | y Nam       |           | NSTON-SALEN      | OLICE                                  | , IN      | INCIDENT/INVESTIGATION                 |               |            |  |     |            |                            |                         | OCA 2423603        |   |                    |                |                           |  |
|--|---|-------------|-----------|------------------|--|-----------|--|---------------|------------|--|-----|------------|----------------------------|-------------------------|--------------------|---|--------------------|----------------|---------------------------|--|
| C  | ORI   | NC          | NC 02     | 40200            |  |           | 1                                      | REPORT        |            |  |     |            |                            |                         |                    | Date / Time Reported SMTWTFS<br>Month Day Yr Time |                    |                |                           |  |
| D<br>E   |   |             | NC 034    |                  | Att At Found SMTHTFS Month Day Yr Time |           |  |               |            |  |     |            | 07   03   2024  09:20 Hrs. |                         |                    |   |                    |                |                           |  |
| N<br>T   | #1  | Jimio I     | nerdeni(s | ,<br>Abandoned V | <sup>7</sup> ehio                      | cle       |  | ı —           | Com        | Month 07                               | ı I |            |                            | ime<br>0:20  Hrs        |                    |   |                    | Yr ㅡ           | Time<br>09:19  Hrs        |  |
| D  | #2  | Crime I     | ncident   |                  |  |           |  |               | _          |  | _   | f Incident | 7   02                     | 7.20                    | - 07               |   | 15   2             |                | Offense Tract             |  |
| A  |   | 7 I         | ! 4 4     |                  |  |           |  | _             | Com        |  |     |            | Rd, W                      | inston-sa               | lem N              |   |                    |                | 312                       |  |
| T<br>A   | #3  | Jillie 1    | ncident   |                  |  |           |  |               | Att<br>Com | Premis                                 | ely | pe         |                            |                         |                    | - 1   |                    |                | ce Type<br>y ∏Multi Famil |  |
| МО   |   |             | d or Com  |                  |  |           |  | ☐ Yes         |            |  |     |            | Forcible Yes               | Weapon / Tools          |                    |   |                    |                |                           |  |
|  | No No   |             |           |                  |  |           |  |               |            |  |     |            |                            |                         |                    | .   D   | /A1                | 1-1            |                           |  |
|  | # of Victims   Type   |             |           |                  |  |           |  |               |            |  |     |            |                            |                         |                    |   |                    |                |                           |  |
| V  | 0   |             | Rel       | igious 🔲 L.E. Of | ficer                                  | Line of D |  |               | know       |  | _   | nternal 🔲  |                            |                         | Other              |   | or                 | □ No           | □N/A                      |  |
| I<br>C   | Victim/Business Name (Last, First, Middle)  Victim of Crime # |             |           |                  |  |           |  |               |            |  |     |            |                            |                         | Race               | Sex   | Relatio<br>To Offe | nship<br>ender | Resident Status  Resident |  |
| T<br>I   | V1  |             | DA        | ΓΑ OMITTED       |  |           |  | Crime "       |            |  |     |            |                            |                         | ☐ Non-Reside       |   |                    |                |                           |  |
| M  | Home Address  |             |           |                  |  |           |  |               |            |  |     |            |                            |                         |                    | Home Phone Unknown                                |                    |                |                           |  |
|  | Employer Name/Address  DATA OMI  Employer Name/Address        |             |           |                  |  |           |  |               |            |  |     |            |                            |                         |                    | Business Phone                                    |                    |                |                           |  |
|  | VYR   |             | ake       | Color            | ATA OMITTED  Color   Lic/Lis   Vir     |           |  |               |            |  | Vin |            |                            |                         |                    |   |                    |                |                           |  |
|  | VIK   | IVI         | аке       | Model            | St                                     | yle       | Color                                  |               | LIC        | J/LIS                                  |     |            |                            | V III                   |                    |   |                    |                |                           |  |
| O<br>T<br>H<br>E<br>R<br>S<br>I<br>N<br>V<br>O<br>L<br>V<br>E<br>D |   |             |           |                  |  |           | DATA                                   | <b>A</b> C    | ЭM         | ITT                                    | EI  | O          |                            |                         |                    |   |                    |                |                           |  |
| Status<br>Codes  |   |             |           |                  |  |           |  |               |            |  |     |            |                            |                         |                    |   |                    |                |                           |  |
|  | Victim<br>#   | DCI         | Status    | Value            | Property Description                   |           |  |               |            |  |     |            | Mal                        | ake/Model Serial Number |                    |   |                    |                |                           |  |
| P -<br>R -<br>O  |   |             |           |                  |  |           | E SCOOTER .                            |               |            |  |     |            |                            |                         | NAME/              | E/Burn-e-ma DATA OMITTED                          |                    |                |                           |  |
|  |   |             |           |                  | $\dashv$                               |           |  |               |            |  |     |            |                            |                         |                    |   |                    | IN             | FOR<br>FORMATION          |  |
|  |   |             |           |                  | $\dashv$                               |           |  |               |            |  |     |            |                            |                         |                    |   |                    |                | SECURITY                  |  |
|  |   |             |           |                  |  |           |  |               |            |  |     |            |                            |                         |                    |   |                    |                | PURPOSES                  |  |
| P :  |   |             |           |                  |  |           |  |               |            |  |     |            |                            |                         |                    |   |                    |                |                           |  |
| R  |   |             |           |                  |  |           |  |               |            |  |     |            |                            |                         |                    |   |                    |                | LY THE FIRST              |  |
| T<br>Y   |   |             |           |                  | $\dashv$                               |           |  |               |            |  |     |            |                            |                         |                    |   | 1                  |                | VE PROPERTY ITEMS ARE     |  |
|  |   |             |           |                  | $\dashv$                               |           |  |               |            |  |     |            |                            |                         |                    |   |                    |                | SPLAYED ON                |  |
|  |   |             |           |                  |  |           |  |               |            |  |     |            |                            |                         |                    |   |                    |                | C REPORTS                 |  |
|  |   |             |           |                  |  |           |  |               |            |  |     |            |                            |                         |                    |   |                    |                |                           |  |
|  | Numb  |             | ehicles S | tolen 0          |  | nber Vehi | Cofficer Sign                          |               | 0          |  |     |            | -                          | Cuparria                | Cionat             | uro   |                    |                |                           |  |
| ID   | SIM   | Officer Sig |           |                  |  |           |  |               |            | or Signature<br>, <i>C. M.</i> (15574) |     |            |                            |                         |                    |   |                    |                |                           |  |
|  | Comp  | lainant     | Signatur  | e                |  |           | Case Statu  Further                    |               | action     | tion                                   | (   | Case Dispo |                            |                         | rated              |   |                    | - Evter        | adition Declined          |  |
| Status   |   |             |           |                  |  |           | ☐ Further  ☐ X Inact ☐ Closed ☐ Closed | tive<br>/Clea | ared       |  |     | ☐ Cleared  | l by Ai<br>l by Ai         | Test by Ander           | Refuse<br>other Ag | gency   | cooperate          | ē              | Page 1                    |  |